PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09782267

CLAIMS AS FILED - PART I							5	SMALL ENTITY		OTHER THAN		
			(Column 1)		(Column 2)			TYPE		OR	SMALL	ENTITY
TOTAL CLAIMS			27					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	· 710.00
TOTAL CHARGEABLE CLAIMS			27 minus 20=		• 7			X\$ 9=		OR	X\$18=	126
INDEPENDENT CLAIMS			3 minus 3 =		0			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column						olumn 2	1	TOTAL		OR	TOTAL	836
CLAIMS AS AMENDED - PART II								•			OTHER	
		(Column 1)		(Colu	mn 2)	(Column 3)		SMALL E	NTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT				PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= '		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***]=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	TCLAIM]	+135=		OR	+270=	
								TOTAL			TOTAL	
										OR	ADDIT. FEE	
		(Column 1)			ımn 2) HEST	(Column 3)	١.					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	*	NUN PREV	MBER NOUSLY FOR	.PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<u> </u>	4	X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+270=	
	+135= TOTAL ADDIT. FEE										TOTAL ADDIT. FEE	
											ADDIT: I EE	
_		(Column 1) CLAIMS			HEST	(Column 3	٦.		ADDI	ì	·	ADDI-
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREV	MBER HOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=]	X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDE					<u> </u>					 	
A STATE OF THE STA										OR	+270=	<u> </u>
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
***		ımber Previously F							propriate bo	x in co	olumn 1.	